PART B - FEE(S) TRANSMITTAL 09 - 21 -
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s (SEP 2	this furth, together w		or	Fax	Commissioner for P.O. Box 1450 Alexandria, Virgi (571)-273-2885	r Patents inia 22313-1450		
NSTRUCTIONS his for appropriate. All funder communicated unless corrected maintenance fee notification	m should be used for trans espondence including the F spendidirected otherwise	mitting the ISSU atent, advance ord in Block 1, by (a)	E FEE and lers and noting specifying a	PUBLIC fication new co	ATION FEE (if requi of maintenance fees we prrespondence address;	ired). Blocks 1 through 5 s vill be mailed to the current and/or (b) indicating a sep	should be completed where t correspondence address as arate "FEE ADDRESS" for	
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)  25297 7590 06/20/2006					Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.			
	ON, TAYLOR & HU	JNT, P. A.		lv to	hereby certify that this corres fail Post Office to Addressee*	service under 37 C.F.R. 1.10 on the ts, P.O. Box 1450, Alexandria, VA 2	e United States Postal Service "Expre e date indicated below and is address	
9/21/2006 WABDELR3 00000041 09938714					Oksana Buynitzky (Depositor's name)			
1 FC:1501 1400.00 OP					Governit Wy (Signature)			
2 FC:1504	September		September	20, 2006	(Date)			
APPLICATION NO.	FILING DATE	FIRST NAMED INVI		) INVEN	TOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
							1777	
TITLE OF INVENTION: SY	YSTEM AND METHOD FO	OR ACCESSING B	IOLOGICAI	L DATA				
APPLN. TYPE	SMALL ENTITY	ISSUE FI	EE	PUBLICATION FEE		TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	МО	\$1400	\$1400		\$300	\$1700	09/20/2006	
EXAMINER		ART UNIT		CI	ASS-SUBCLASS			
MIZRAHI, DIANE D		2165	2165		707-100000	J		
<ol> <li>Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).</li> <li>Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.</li> <li>"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.</li> </ol>			2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.					
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		elow, no assignee of this form is NO					document has been filed for	
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Authorized Signature	My a. J	sfor.	•	-		ember 20, 2006		
Typed or printed name Arles A. Taylor, Jr.				Registration No. 39,395				
This collection of information an application. Confidential submitting the completed a this form and/or suggestion. Box 1450, Alexandria, Virg	on is required by 37 CFR 1.3 ity is governed by 35 U.S.C pplication form to the USPT s for reducing this burden, sinia 22313-1450. DO NOT	11. The information 122 and 37 CFR O. Time will vary nould be sent to the SEND FEES OR	on is required 1.14. This co depending use Chief Information COMPLETER	to obtain llection pon the mation C D FORM	n or retain a benefit by is estimated to take 12 individual case. Any co officer, U.S. Patent and is TO THIS ADDRES	the public which is to file (a minutes to complete, includ omments on the amount of to Trademark Office, U.S. De S. SEND TO: Commissione	nd by the USPTO to process) ing gathering, preparing, and time you require to complete partment of Commerce, P.O. r for Patents, P.O. Box 1450.	

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